

PCT**REQUEST**

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving use only

PCT/F103/00736

International Application No.

International Filing Date **07 OCT 2003 (87-10-2003)****The Finnish Patent Office
PCT International Application**

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum) **miniferon****Box No. I TITLE OF INVENTION****Peptides and recombinant proteins mimicking interferons****Box No. II APPLICANT** This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

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Russian Federation

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Applicant's registration No. with the Office

State (that is, country) of nationality:
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This person is applicant all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

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This person is:

applicant only
 applicant and inventor
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

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This person is applicant all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

 Further applicants and/or (further) inventors are indicated on a continuation sheet.**Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

 agent common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

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Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

If none of the following sub-boxes is used, this sheet should not be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

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This person is applicant for the purposes of: all designated States all designated States except the United States of America only the United States of America only the States indicated in the Supplemental Box

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 inventor only (If this check-box is marked, do not fill in below.)

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Further applicants and/or (further) inventors are indicated on another continuation sheet.

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